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**CONFIDENTIAL ATTORNEY-CLIENT
PRIVILEGED COMMUNICATION**

Date: JUNE 24, 2004

To: EXAMINER FARHOOD MOSLEHI
U.S. PATENT AND TRADEMARK OFFICE

Fax #: (703) 746-7238

From: DARRIN WESLEY HARRIS
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Client/Matter No.: AUS920010194US1 (9000/35)

of Pages: 14
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | |
|----------------------|---------------------------|
| Attorney Docket No. | AUS920010194US1 (9000/35) |
| Application Number | 09/821,109 |
| Filing Date | MARCH 29, 2001 |
| First Named Inventor | James L. Knutson |
| Group Art Unit | 2154 |
| Examiner | MOSLEHI, FARHOD |

ENCLOSURES (check all that apply)

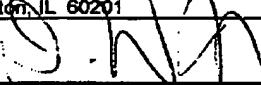
| | | |
|---|--|---|
| <input checked="" type="checkbox"/> Response to a Final Office Action Dated March 24, 2004 | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> After Final | <input type="checkbox"/> Drawings: | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> After Allowance Communication to Group | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Status Letter | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition | <input type="checkbox"/> Post Card Receipt |
| <input type="checkbox"/> Petition for Extension of Time Request (duplic) | <input type="checkbox"/> To Convert a Provisional Application | <input type="checkbox"/> Additional Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Request For Continued Examination Transmittal Dated June 24, 2004 |
| <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art | <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Small Entity Statement | <input type="checkbox"/> |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | <input type="checkbox"/> Request of Refund | <input type="checkbox"/> |
| | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed. | |
| | <input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed. | |

CALCULATION OF FEE

| | Claims After Amendment | | Highest No. Previously Paid For | Present Extra | Small Entity | | Large Entity | |
|---|------------------------|-------|---------------------------------|---------------|-----------------|-----------|-----------------|-----------|
| | | | | | Rate | Add'l Fee | Rate | Add'l Fee |
| Total | | Minus | | 0 | x \$9= | 0 | x \$18= | |
| Indep. | | Minus | | 0 | x \$43 | 0 | x \$86 | |
| First Presentation of Multiple Dep. Claim | | | | | + \$145 | — | + \$290= | |
| | | | | | total add'l fee | \$ 0 | total add'l fee | \$ 0 |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

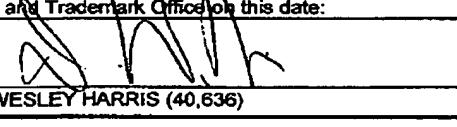
Firm or Individual name
DARRIN WESLEY HARRIS
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1603 Orrington Avenue, Suite 2000
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Signature  Date June 24, 2004

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted via facsimile to (703) 746-7238 to the United States Patent and Trademark Office on this date:

June 24, 2004

Signature  Date: June 24, 2004

DARRIN WESLEY HARRIS (40,636)